## NONPARTISAN CANDIDATE GENERAL ELECTION DESIGNATION PETITION

WARNING:			
IT IS AGAINST THE LAW:  For anyone to sign this petition with any name other than one's own or to knowingly sign one's name more than once for the same			
ca	ndidate or to knowingly sign the petition when not a registered elector.		
> D _	Do not sign this petition unless you are an eligible elector. To be an eligible elector you must be registered to vote and eligible to vote inelections.		
	(Name of political subdivision)  ➤ Do not sign this petition unless you have read or have had read to you the proposed nomination petition in its entirety and understand its meaning.		
PETITION TO NOMINATE THE OFFICE OF Title of Office/District #			
Name of person sought to be elected  Title of Office/District #  TO THE HONORABLE GIGI DENNIS, SECRETARY OF STATE			
We, the undersigned registered electors of the State of Colorado representing the electorate of			
Hereby nominate, who resides at			
For the office of to be voted for at the General Election to be held on November 7, 2006.  Title of Office/District #			
Title of Office/District #  I am an eligible elector in the district mentioned in this petition as shown on the registration books of the county clerk and recorder.  I have not signed any other petition for any other candidate for the same office.			
	Signature	Residence Address (Street & Number)	County
1	Printed Name	City/Town	Date of Signing
2	Signature	Residence Address (Street & Number)	County
	Printed Name	City/Town	Date of Signing
	Signature	Residence Address (Street & Number)	County
3	Printed Name	City/Town	Date of Signing
			0 0
4	Signature	Residence Address (Street & Number)	County
	Printed Name	City/Town	Date of Signing
5	Signature	Residence Address (Street & Number)	County
	Printed Name	City/Town	Date of Signing
6	Signature	Residence Address (Street & Number)	County
	Printed Name	City/Town	Date of Signing
7	Signature	Residence Address (Street & Number)	County
	Printed Name	City/Town	Date of Signing
	Signature	Residence Address (Street & Number)	County
8		, , , , , , , , , , , , , , , , , , ,	·
	Printed Name	City/Town	Date of Signing
9	Signature	Residence Address (Street & Number)	County
	Printed Name	City/Town	Date of Signing
	Signature	Residence Address (Street & Number)	County
10	Printed Name	City/Town	Date of Signing
AFFIDAVIT OF CIRCULATOR  I,			
	Signature of Circulator Resider	ice Address (Street & Number) City/Town/Zip County	Date of Signing
STATE OF COLORADO, COUNTY OF			
Subscribed and sworn to before me this day of, 20			
	(SEAL)		
Signature/Title of Official Administering Oath			
		My Commission Expires:	